

EXHIBIT 12

**REDEMPTION REQUEST FORM
INSTRUCTIONS**

This form should be saved and may be used by a shareholder wishing to redeem shares in the Fund. Redeeming shareholders should complete and return this form, including the information on page RR-3.

FAIRFIELD SENTRY LIMITED
c/o Citco Fund Services (Europe) B.V.
Telestone 8 – Teleport
Naritaweg 165
1043 BW Amsterdam
The Netherlands
Telephone: (31-20) 572-2100
Fax: (31-20) 572-2610

Dated (month, day, year): August 25th 2008

Dear Sirs:

I hereby request redemption, as defined in and subject to all of the terms and conditions of the Confidential Private Placement Memorandum, as it may be amended from time to time (the "Memorandum"), of Fairfield Sentry Limited (the "Fund"), of 68 shares, (the "Shares") representing [part] of my Shares in the Fund. I understand that redemption will only be effective as of the close of business on the last day of any calendar month, upon at least fifteen (15) calendar days' prior written notice. Except as otherwise provided in the Memorandum, payment of the redemption proceeds will be made within thirty (30) days after the effective date of redemption.

I hereby represent and warrant that (i) I am the true, lawful and beneficial owner of the Shares of the Fund to which this Request relates, with full power and authority to request redemption of such Shares; and (ii) I am not a "U.S. Person" (as that term is defined in the Memorandum). These Shares are not subject to any pledge or otherwise encumbered in any fashion. My signature has been guaranteed by a commercial bank acceptable to the Fund.

Wire Transfer Instructions (to be completed by redeeming shareholder):

Bank Name

JP MORGAN CHASE BANK NA, NEW YORK
SWIFT CODE : CHASUS33

Bank Address

ABA **Redacted**

BEN : CREDIT AGRICOLE (SUISSE) S.A.

ABA /CHIPS/ BIC Codes

SWIFT CODE : AGRICHGG

A/C **Redacted** 6869

Account Name

Account Number

RR-1

SIGNATURES MUST BE IDENTICAL TO NAME(S) IN WHICH SHARES ARE REGISTERED

**ENTITY SHAREHOLDER (OR
ASSIGNEE)**

**INDIVIDUAL SHAREHOLDER(S)
PARTNERSHIP, CORPORATION (OR
ASSIGNEE) OR TRUST**

CREDIT AGRICOLE (SUISSE) S.A.


Name of Registered Owner of Shares

Administration Center
Chemin de Bérée 46-48
1010 Lausanne 10 La Sallaz

Address Switzerland

Name of Subscriber

Address


Signature (of individual or assignee)

Signature (of partner, authorized corporate
officer or trustee)

Officer

Joux Jean-David

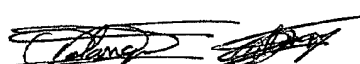
Name and Title

Please Print Name and Title

M August the 25th 2008

Date

Date


Signature (of individual or assignee)

Signature (of partner, authorized corporate
officer or trustee)

Officer

Olivier DELANGE

Name and Title

Please Print Name and Title

August the 25th 2008

Date

Date

Signatures guaranteed by:

RR-2

REDEMPTION INFORMATION

SHARE REGISTRATION

Name CREDIT AGRICOLE (SUISSE) S.A.
Administration Center
Chemin de Bérée 46-48

Address 1010 Lausanne 10 La Sallaz
Switzerland

Country of Residence

+41 58 321 56 50

Telephone

Telephone (Evenings)

+41 58 320 17 00

Fax

MAILING (POST) INFORMATION
(if other than address of registration)

Name

Address

Country of Residence

Telephone

Telephone (Evenings)

Fax

BANK FOR TRANSFER OF REDEMPTION

Name

Address

Country of Residence

Telephone

Telephone (Evenings)

Fax

JP MORGAN CHASE BANK NA, NEW YORK

SWIFT CODE : CHASUS33

ABA Redacted

BEN : CREDIT AGRICOLE (SUISSE) S.A.

SWIFT CODE : AGRICHGG

A/C Redacted 6869

RR-3

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[To be completed by the Fund]

THIS SUBSCRIPTION APPLICATION IS HEREBY ACCEPTED BY FAIRFIELD SENTRY
LIMITED

Date: _____, 200_

Name of authorized signatory: _____

Title of authorized signatory: _____

Signature: _____

Subscriber's name: _____

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